ENTRY BLANK	VAULT
PLEASE TYPE OR PR	INT
☑Ms.	
☐ Mr. Artist	Sharon Boardway
	(Last Name Last)
Permanent	10 1 TT B
Address 74	E. Bridge St Apt 33 Bere
Street	City
44017	Daytime Tel. (214) 234 - 7565
Zip	Area Code
Temporary or	
Studio Address	same
Street	City
	Daytime Tel.( ) Same
Zip	Area Code work > 234 - 4877
If you do not presentl	ly live in one of the counties of the
Western Reserve, in w	hich county were you born?
Collaborator	
Collaborator	(If Any)
If May Show entries a	are not accepted or not sold:
Artist will pick up a	

to this address: Aleason Bandaus

☐ Museum should dispose of.

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

☐ Museum should ship to artist at artist's expense

This Entry blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 29, 1986.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature Ahacon Boacolman

\ \ DO NOT DETACH

DETACH

1986 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

_ Sharon Boardway					
Name					
	74 E Bridge St Apt 33				
Address					
	Berea OH 44017				
City & State	Zip				

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1	☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Crafts					
Title "Swizzle Stick						
	T WRITE IN THIS SECTION  HE SECTION  ABCO	N	ACCEPTED	REJECTED		
2 ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☒ 5. Crafts						
Title untitled						
DO NO	T WRITE IN THIS SECTION	NO	ACCEPTED	REJECTED		

RETURN OF OBJECTS: REJECTED: MAY 6-10 ACCEPTED: JULY 8-12

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.